



## TRANSMITTAL FORM

*(to be used for all correspondence during pendency of filed application)*

Application Number	10/759,777		
Filing Date	January 16, 2004		
First Named Inventor	Jan Vet		
Group Art Unit Number	2632		
Examiner Name	Van T. Trieu		
Total Number of Pages in This Submission	12	Attorney Docket Number	23255-08754

### ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Check Enclosed	<input type="checkbox"/> Issue Fee Transmittal
<input checked="" type="checkbox"/> Return Receipt Postcard	<input type="checkbox"/> Letter to Chief Draftsperson
<input type="checkbox"/> Response to Notice to File Missing Parts	<input type="checkbox"/> Formal Drawing(s): [ ] Sheet(s) of Figure(s) [ ]
<input type="checkbox"/> Assignment & Recordation Cover Sheet	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Declaration	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Power of Attorney	<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Application Data Sheet	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Information Disclosure Statement & PTO/SB/08A <input type="checkbox"/> Copies of IDS Cited References	<input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Request for Corrected Filing Receipt	
<input type="checkbox"/> Request for Correction of Recorded Assignment	
<input checked="" type="checkbox"/> Amendment/Response: 9 Pages <input type="checkbox"/> After Final	
<input type="checkbox"/> Status Request	
<input type="checkbox"/> Revocation and Substitute Power of Attorney	

### REMARKS:

### SIGNATURE OF ATTORNEY OR AGENT

Signature:	<i>A.C. Smith</i>	
Attorney/Reg. No.:	Albert C. Smith, Reg. No. 20,355	Dated: 12/8/05

### CERTIFICATE OF MAILING

I hereby certify that this correspondence, including the enclosures identified above, is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. If the Express Mail Mailing Number is filled in below, then this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service pursuant to 37 CFR 1.10.

Signature:	<i>A.C. Smith</i>	
Typed or Printed Name:	Albert C. Smith	Dated: 12/8/05
Express Mail Mailing Number (optional):		



# FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$0)

Complete if Known	
Application Number	10/759,777
Filing Date	January 16, 2004
First Named Inventor	Jan Vet
Examiner Name	Van T. Trieu
Art Unit	2632
Attorney Docket No.	23255-08754

## METHOD OF PAYMENT (check all that apply)

Check  Credit Card  Money Order  Other  None  
 Deposit Account:

Deposit Account Number **19-2555**

Deposit Account Name **Fenwick & West LLP**

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below  Credit any overpayments  
 Charge all required fee(s) or any underpayment of fee(s) due under 37 CFR §1.16 or §1.17 during the pendency of this application  
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity | Small Entity

Fee	Fee	Fee	Fee Description	Fee Paid
Code	(\$)	Code	(\$)	

**SUBTOTAL (1)** (\$0)

### 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
<input type="checkbox"/>	-20**= <input type="checkbox"/>	X <input type="checkbox"/>	= <input type="checkbox"/>
<input type="checkbox"/>	-3**= <input type="checkbox"/>	X <input type="checkbox"/>	= <input type="checkbox"/>
Multiple Dependent			

Large Entity	Small Entity	Fee Description	
Fee	Fee	Fee Description	
Code	(\$)	Code	(\$)

1202 50 2202 25 Claims in excess of 20  
1201 200 2201 100 Independent claims in excess of 3  
1203 360 2203 180 Multiple dependent claim, if not paid  
1204 200 2204 100 \*\*Reissue independent claims over original patent  
1205 50 2205 25 \*\*Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2)** (\$0)

\*\*or number previously paid, if greater; For Reissues, see above

## 3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1051	130	2051 65 Surcharge - late filing fee or oath or declaration	
1052	50	2052 25 Surcharge - late provisional filing fee or cover sheet	
1053	130	1053 130 Non-English specification	
1812	2,520	1812 2,520 For filing a request for ex parte reexamination	
1804	920*	1804 920* Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805 1,840* Requesting publication of SIR after Examiner action	
1251	120	2251 60 Extension for reply within first month	
1252	450	2252 225 Extension for reply within second month	
1253	1020	2253 510 Extension for reply within third month	
1254	1,590	2254 795 Extension for reply within fourth month	
1255	2,160	2255 1,080 Extension for reply within fifth month	
1401	500	2401 250 Notice of Appeal	
1402	500	2402 250 Filing a brief in support of an appeal	
1403	1000	2403 500 Request for oral hearing	
1451	1,510	1451 1,510 Petition to institute a public use proceeding	
1452	500	2452 250 Petition to revive - unavoidable	
1453	1,500	2453 750 Petition to revive - unintentional	
1501	1,400	2501 700 Utility issue fee (or reissue)	
1502	800	2502 400 Design issue fee	
1503	1100	2503 550 Plant issue fee	
1460	—	1460 — Petitions to the Director	
1807	50	1807 50 Processing fee for Provisional Applications	
1806	180	1806 180 Submission of Information Disclosure Stmt	
8021	40	8021 40 Recording each patent assignment per property (times number of properties)	
1809	790	2809 395 Filing a submission after final rejection (37 CFR 1.129(a))	
1810	790	2810 395 For each additional invention to be examined (37 CFR 1.129(b))	
1801	790	2801 395 Request for Continued Examination (RCE)	
1802	900	1802 900 Request for expedited examination of a design application	
Other fee (specify) _____			

**SUBTOTAL (3)** (\$0)

\*Reduced by Basic Filing Fee Paid

## SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Albert C. Smith	Registration No. (Attorney/Agent)	20,355	Telephone 650.335.7296
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Signature

*A.C. Smith*

Date

*12/8/05*



IN THE UNITED STATES  
PATENT AND TRADEMARK OFFICE

APPLICANT(S): Jan Vet

APPLICATION NO.: 10/759,777

FILING DATE: January 16, 2004

TITLE: Programmable Positioning and Telemetric System,  
Transmitter and Programming Station and Method of  
Operating Such

EXAMINER: Van T. Trieu

GROUP ART UNIT: 2632

ATTY. DKT. NO.: 23255-08754

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below:

Dated: 12/8/05 By: A.C. Smith  
Albert C. Smith, Reg. No.: 20,355

MAIL STOP AMENDMENT  
COMMISSIONER FOR PATENTS  
P.O. BOX 1450  
ALEXANDRIA, VA 22313-1450

**AMENDMENT**

Sir:

In response to the Official Action dated November 28, 2005 received in the patent application identified above, please amend the specification in this application as indicated herein.